

Docket No. 0207/75723-ZA/JPW/GJG/PJSIN THE UNITED STATES PATENT AND TRADEMARK OFFICEApplicant(s): David Baltimore, et al.

Serial No. : 10/037,341 Examiner: D. Guzo
Filed : January 4, 2002 Group Art Unit: 1636
For : Nuclear Factors Associated With Transcriptional Regulation

Mail Stop Amendment
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

Date: December 4, 2007

Sir:

Transmitted herewith is an amendment to the above-identified application.

- ____ Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has been previously established.
- ____ A verified statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.
- ____ No additional fee is required.

The filing fee is calculated as follows:

	Number after Amendment	Highest Number Previously Paid For ¹	Number of Extra Claims Presented	RATE		FEE	
				Small Entity	Other Entity	Small Entity	Other Entity
Total Claims	2 -	* 89 =	*** 0 X	\$25	\$50	=	0
Independent Claims	2 -	** 47 =	*** 0 X	\$105	\$210	=	0
Multiple Dependent Claim(s) Presented For First Time Yes <input checked="" type="checkbox"/> No				\$185	\$370	=	0
				TOTAL ADDITIONAL FEE		\$ 0	

¹ The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment or the number of claims originally filed.

* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0".



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Amendment Transmittal Letter

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The following are also enclosed:

One additional copy of this Amendment Transmittal Letter

Return Receipt Postcard

An Information Disclosure Statement, including Form PTO-1449

(Copies of citations included: Yes No X

and a fee of \$ 180.00 included)

A Petition for an Extension of Time, including a fee of
\$ for a Petition for Month(s) Extension of Time

Other (identify): _____

THE TOTAL FEE DUE IS \$ 180.00.

A check in the amount of \$ 180.00 is enclosed.

Please charge Deposit Account No. in the amount of
\$.

The Commissioner is hereby authorized to charge any additional fees
required or credit any overpayment to Deposit Account No. 03-3125
as follows:

Fees under 37 C.F.R. §1.16 for the presentation of extra claims
 Patent application processing fees under 37 C.F.R. §1.17

Respectfully submitted,

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I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450. <i>Gary J. Gershik</i> Gary J. Gershik Reg. No. 39,992 date
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